



Mississippi
Schedule A - Itemized Deduction
Schedule B - Interest & Dividends and Schedule N - Other Income
2006

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Taxpayer Name

Social Security Number

PART 1: SCHEDULE A - Itemized Deductions**(From Federal Form 1040 Schedule A)****(MUST COMPLETE FULLY.)****ROUND TO THE NEAREST DOLLAR**

If the amount of AGI on Form 1040 exceeds the federal limits, you must refer to your Federal Schedule A and complete the worksheet provided in the MS Instructions on Page 13. Enter the result on Line 9 below. In the event you filed using the standard deduction on your Federal Return and wish to itemize for Mississippi purposes, use Federal Form 1040 Schedule A as a worksheet and transfer the information from the specific lines indicated to this Schedule A.

- | | | |
|---|-----|--|
| 1. a. Medical and Dental Expenses | 1a. | |
| b. AGI from Federal Form 1040 \$ _____ X 7.5%(.075) | 1b. | |
| c. Medical & Dental Expense Deduction (Subtract line 1b from line 1a.) | 1c. | |
| 2. a. Total Taxes Paid | 2a. | |
| b. Less State Income Taxes (or other taxes in lieu of) | 2b. | |
| c. Total Taxes Paid Deduction (Subtract line 2b from line 2a.) | 2c. | |
| 3. Total Interest Paid | 3. | |
| 4. Charitable Contributions | 4. | |
| 5. Total Casualty or Theft Loss (Must Attach Fed Form 4684.) | 5. | |
| 6. a. Employee Expenses & Misc. Deductions Subject to 2% Limitation
(Must Attach Fed Form 2106.) | 6a. | |
| b. AGI from Federal Form 1040 \$ _____ X 2%(.02) | 6b. | |
| c. Subtract line 6b from line 6a | 6c. | |
| 7. a. Other Miscellaneous Deductions | 7a. | |
| b. Less MS Gambling Losses | 7b. | |
| c. Other Miscellaneous Deduction (Subtract line 7b from line 7a.) | 7c. | |
| 8. Mississippi Itemized Deductions - (Add Lines 1c, 2c, 3, 4, 5, 6c, and 7c.) Enter the amount here and on
Resident Form 80-105, Page 1, Line 19 or Non-Resident Form 80-205, Page 1, Line 16a. | 8. | |
| 9. Mississippi Itemized Deductions (Federal limits due to AGI apply) Enter here and on Form 80-105,
Page 1, Line 19 or Form 80-205, Page 1, Line 16a. | 9. | |

PART 2: SCHEDULE B - Interest and Dividend Income (From Federal Form 1040 Schedule B)

If you received capital gain distributions but do not need SCHEDULE D to report any other gains or losses, then enter the gain on Form 80-105, Page 2, Line 40 or Form 80-205, Page 2, Line 39. Total interest and dividend amounts on Lines 4 & 5 below, from jointly owned accounts, may be split between taxpayer and spouse before the amounts are transferred to Form 80-105, Page 2, Lines 36 and 37, respectively.

- | | | Interest | Dividends |
|--|----|----------|-----------|
| 1. Interest Income From All Sources | 1. | | |
| 2. Amount of MS Non-Taxable Interest in Line 1. | 2. | | |
| 3. Total MS Interest (Line 1 minus Line 2). Enter here & on Form 80-105, Page 2, Line 40 or Form 80-205, Page 2, Line 39. | 3. | | |
| 4. Total Dividends From All Sources | | | 4. |
| 5. Amount of MS Nontaxable Distributions Reported in Line 4 | | | 5. |
| 6. Total MS Dividends (Line 4 minus Line 5). Enter here and on Resident Form 80-105, Page 2, Line 41 or Non-Resident Form 80-205, Page 2, Line 40. | | | 6. |

PART 3: VOLUNTARY CONTRIBUTION CHECK-OFFS (Resident Returns Only)

You may elect to voluntarily contribute all or part (at least \$1) of your income tax refund to one or more of the funds listed below. Your contribution may be claimed as a tax deductible charitable contribution on your state and federal income tax returns. Once your return is filed, your contribution is **final** and cannot be refunded. On page 1, Line 30, form 80-105 please indicate by each Fund J, K, L, M, N, and/or Z the amount(s) of your refund you wish to contribute to each of these funds, then enter total in the box provided. Refer to the instruction booklet 80-100 (may be downloaded from our website www.mstc.state.ms.us) for an explanation of the purpose of each of these funds and how the refund donations will be used.

- | | |
|-----|---|
| (J) | Mississippi Military Family Relief Fund |
| (K) | Mississippi Commission for Volunteer Service Fund |
| (L) | Mississippi Wildlife Heritage Fund |
| (M) | Mississippi Educational Trust Fund |
| (N) | Mississippi Wildlife Fisheries and Parks Foundation |
| (Z) | Mississippi Fire Fighters Memorial Burn Center Fund |



MISSISSIPPI

Other Income (Loss) and Supplemental Income

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SSN

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 PART4: INCOME (LOSS) FROM RENTS, ROYALTIES, PARTNERSHIPS, S CORPORATIONS, TRUSTS & ESTATES**INCOME (LOSS) FROM RENTAL REAL ESTATE AND ROYALTIES**

Total Rental Real Estate and Royalty Income (Loss) from Part 1, Federal Schedule E	00
Add: Depletion claimed in excess of cost basis	00
A. Rental Real Estate and Royalty Income (Loss) for Mississippi purposes. Add above 2 lines.	00

INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS

Name of Partnership or S Corporation	FEIN (Must include FEIN)	INCOME OR (LOSS) (Nonresidents use Mississippi K-1's)
	-	00
	-	00
	-	00
	-	00
	-	00
	-	00
	-	00
B. Total Partnership and/or S Corporation Income (Loss)		00

INCOME (LOSS) FROM ESTATES AND TRUSTS

Name of Estate or Trust	FEIN (Must include FEIN)	INCOME OR (LOSS) (Use Mississippi K-1's)
	-	00
	-	00
	-	00
C. Total Estate and Trust Income (Loss)		00
D. Total of Lines A, B, & C. Enter here and on Line 38, Page 2, Form 80-105 or Line 37, Page 2, Form 80-205. (Income from Rents, Royalties, P'ships, S Corps, Trusts & Estates.)		00

PART 5: SCHEDULE N - Other Income (Loss) and Supplemental Income (If negative, shade minus (-) in box as in example at left)

List type of Income (Loss) or Adjustment

1.		00
2.		00
3.		00
4.		00
5.		00
6.		00
Total Schedule N Other Income (Loss) Enter here and on Line 45, Page 2, Form 80-105 or Line 44 Page 2, Form 80-205.		00